UTILITY PATENT APPLICATION TRANSMITTAL UNDER 37 CFR 1.53(b)

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To: Mail Stop - Patent Application

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APPARATUS FOR TRANSPORTING **SHEET-LIKE ELEMENT**

First Named Inventor (or Application Identifier):

Express Mai <mark>l L</mark> abel No. <u>E</u> Y	V 325464816 US	626
Name: X SYC	La. Noure	4500 S
Date: March / . 2004		

Dirk Dobrindt							
Enclosed are:							
1. X Specification	6. Assignment of the invention to NexPress Solutions LLC						
2. 1 Sheet(s) of FORMAL drawing(s)	7. X Certified copy of German Priority Appln. No. 103 09 095.9 – Filed: 03March2003						
3. Information Disclosure Statement Under 37 CFR 1.9	Associate Power of Attorney						
 4. Combined Declaration for Patent Application and Power of Attorney: 4a. X New (Unsigned) 4b. Copy from a prior application (37 CFR 1.63(d) (for continuation/divisional with Box 11 completed) 							
5. <u>Incorporation by Reference (useable if Box 4b is</u>	9. <u>Deletion of Inventor(s)</u> .						
Checked) The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein. Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).							
10. If a 111A application prior to examination of the abov	e-identified application, amend the specification at Page 1,						
after the title, by inserting the following:CROSS REFERENCE TO RELATED APPLICATION Reference is made to and priority claimed frofiled, entitled.							
If a CONTINUING APPLICATION, check appropriate box an	nd supply the requisite information:						
	-in-part (CIP) of prior Application No:						
Filed:, Entitled: 12. X Please address all written communications to: Lawrence							
NexPress Solutions LLC, 1447 St. Paul Street, Rochester, New York 14653-7103 (U.S.A.)							
Please Direct all telephone calls to: Lawrence P. Kessler at Telephone No. (585) 253-0123.							

The filing fee has been calculated as shown	n below:					
FOR:	NO. FILED		NO. EXTRA	RATE	FEE	
BASIC FEE					\$	770
TOTAL CLAIMS	16	- 20 =		x 18 =	\$	0
INDEPENDENT CLAIMS	1	- 3=		x 86 =	\$	0
MULTIPLE DEPENDENT CLAIM PRESENTED			+ 290	\$	0	
				TOTAL	\$	770

Please charge the NexPress Solutions LLC, Deposit Account No. 50-1466 in the amount of:

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A duplicate copy of this sheet is enclosed

The Commissioner is hereby authorized to charge any additional filing fees required under 37 CFR 1.16 or credit any overpayment to: NexPress Solutions LLC, Deposit Account No. 50-1466.

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Enc.